

**U.S. DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS
ATTORNEY APPEARANCE FORM**

NOTE: In order to appear before this Court an attorney must either be a member in good standing of this Court's general bar or be granted leave to appear *pro hac vice* as provided for by Local Rules 83.12 through 83.14.

In the Matter of

Case Number: 08 CV 3127

LINDA L. MACK v. BARRY S. MARAM, in his official capacity as Director of the Illinois Dep't of Helthcare & Family Services; and CAROL L. ADAMS, in her official capacity as Secretary of the Illinois Dep't of Human Services.

AN APPEARANCE IS HEREBY FILED BY THE UNDERSIGNED AS ATTORNEY FOR:

BARRY S. MARAM, in his official capacity as Director of the Illinois Department of Healthcare and Family Services.

NAME (Type or print) John E. Huston	
SIGNATURE (Use electronic signature if the appearance form is filed electronically) s/ John E. Huston	
FIRM Illinois Attorney General's Office	
STREET ADDRESS 160 N. LaSalle Street, Suite N-1000	
CITY/STATE/ZIP Chicago, Illinois 60601	
ID NUMBER (SEE ITEM 3 IN INSTRUCTIONS) 3128039	TELEPHONE NUMBER 312-793-2380
ARE YOU ACTING AS LEAD COUNSEL IN THIS CASE? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
ARE YOU ACTING AS LOCAL COUNSEL IN THIS CASE? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
ARE YOU A MEMBER OF THIS COURT'S TRIAL BAR? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
IF THIS CASE REACHES TRIAL, WILL YOU ACT AS THE TRIAL ATTORNEY? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
IF THIS IS A CRIMINAL CASE, CHECK THE BOX BELOW THAT DESCRIBES YOUR STATUS. RETAINED COUNSEL <input type="checkbox"/> APPOINTED COUNSEL <input type="checkbox"/>	